Approval Expires 4/30/22

& EPA

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460 UIC Federal Reporting System

UIC Federal Reporting System
Part III: Inspections
Mechanical Integrity Testing
(This information is solicited under the
authority of the Safe Drinking Water Act)

I. Name and Address of Reporting Agency U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard Chicago, IL 60604

Michigan DI Program

II. Date Prepared (month, day, year)
March 08, 2019

III. State Contact (name, telephone no.)

IV. Reporting Period (month, year)

October 1, 2009

September 30, 2010

							Class and	Type of Inje	ction Wells		
							11				
			ltem		ı	SWD 2D	ER 2R	HC 2H	III	IV	v
	Total Wells	Α	Number of Wells Inspected		11	138	109	0	0		542
v.			Number of Mechanical Integrity (MIT) Witnessed	y Tests	6	126	103	0	0		1
Summary	•	!	2.Number of Emergency Respons Complaint Response Inspectio		0	1	0	0	0		0
of	Total Inspections	В	Number of Well Constructions Witnessed		0	0	0	0	0		0
Inspections			4. Number of Well Pluggings Witnessed		0	0	0	0	0		0
			5. Number of Routine/Periodic Inspections		5	11	6	0	0		132
	Total	Α	Number of Wells Tested or Evalu for Mechanical Integrity (MI)		0	1	1	0	2		1
	Wells No. of Rule-Authorized Wells Tested/Evaluated for Mis		No. of Rule-Authorized Wells Tested/Evaluated for MIs	Passed 2-part test	0	0	0	0	0		0
•				Failed 2-part test	0	0	0	0	0		0
			Number of Annulus Pressure Monitoring Record Evaluations	Well Passed	0	0	0	0	0		
Vi.				Well Failed Well Passed	0 18	136	124	0	3		
	For		2. No. of Casing/ Tubing Pressure Tests	Well Failed	0	2	3	0	0		
Summary	Significant	С	3. Number of Monitoring	Well Passed	0	0	0	0	0		-
of	Leak		Record Evaluations	Well Failed	0	0	0	0	0		542 1 0 0 0 132 1 0
		1	4, No. of Other Significant Leak	Well Passed	0	0	0	0	9		+
Mechanical			Tests/Evaluations (Specify)	Well Failed	0	0	0	0	0		0
Integrity		†	1. Number of Cement	Well Passed	0	1	0	0	0		0
(MI)	ļ		Record Evaluations	Well Failed	0	0	0	0	0		0
(INII)			2. Number of Temperature/	Well Passed	5	1	1	0	11		12
	For	_	Noise Log Tests	Well Failed	0	0	0	0	0		0
	Fluid Migration	D	3. No. of Radioactive Tracer/	Well Passed	4	1	0	0	0		0
			Cement Bond Tests	Well Failed	0	0	0	0	0		542 1 0 0 0 132 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 11 0
			4. No. of Other Fluid Migration	Well Passed	0	0	0	0	0		0
			Tests/Evaluations (Specify)	Well Failed	0	0	0	0	0		0
	Total Wells	Α	Number of Wells with Remedial Action		1	27	55	0	1		0
VII.			Number of Casing Repaired/ Squeeze Cement Remedial Ac	tions	0	1	0	ó	0		0
VII. Summary of Remedial Action	Total Remedial	_	Number of Tubing/Packer Remedial Actions		1	26	54	0	1		0
	Actions	Remedial B 3	3. Number of Plugging/Abandon Remedial Actions	ment	0	0	1	0	0		0
			4. Number of Other Remedial Ac (Specify)	tions	0	0	0	0	0		0

VIII. Remarks/Ad Hoc Report (Attach additional sheets)

Certification

I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature and Typed or Printed Name and Title of Person Completing Form	Date	Telephone No.
digitature and Typed or 1 timed Wallic and Title of 1 closif completing 1 clin		

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Section V. Summary of Inspections

A complete inspection should include an assessment of: the well head, pressure and flow meters, pipeline connections, and any other equipment associated with the injection system. An inspec-tion is complete only when a report has been filed with the primacy agency.

Item A: For each well class, enter the number of wells that have been inspected as of the end of the reporting period. Enter each well only once.

Total Inspections (this federal fiscal year to date):

Item 1: For each well class, enter the number of inspections to witness field Mechanical Integrity Tests. (At least 25% of MITs performed by operators each year should be witnessed.)

Item 2: For each well class, enter the number of inspections that have been in response to a problem reported to the regulating authority.

Item 3: For each well class, enter the number of inspections of well constructions or any preoperational activities.

Item 4: For each well class, enter the number of inspections of plugging and abandonment.

Item 5: For each well class, enter the number of inspections that have been routine / periodic.

Section VI. Summary of Mechanical Integrity

A complete MIT is composed of a test for significant leaks in the casing, tubing or packer and a test for significant fluid migration into a USDW through vertical channels adjacent to the well bore. An MIT consists of a field test on a well or an evaluation of a well's monitoring records (i.e., annulus pressure, etc.) or cement records. At a minimum, the mechanical integrity of a Class I, II, or III (solution mining of salt) well should be demonstrated at least once every five years during the life of the well.

Item A: For each well class, enter the total number of wells (i.e., permitted and rule authorized) that have had a complete MIT this federal fiscal year to date. Enter each well only once.

Item B: For each well class, enter the number of rule authorized wells that have passed a complete MIT and the number that have failed a complete MIT this federal fiscal year to date.

EPA Form 7520-3 (Rev. 4-19) Revised

Item C: Significant Leak Tests: (this federal fiscal year to date)

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for significant leaks.

Item D: Fluid Migration Tests (this federal fiscal year to date):

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for fluid migration.

Section VII. Summary of Remedial Action

A failure of mechanical integrity (MI) may occur at any time during the life of an injection well. Failure may be identified during an inspection, a field test, an evaluation of well records, or during routine operation of a well. Remedial actions include additional permit conditions, monitoring, or testing.

Item A: For each well class, enter the number of wells that have received remedial actions this federal fiscal year to date. Enter each well only once.

Total Remedial Actions: (this federal fiscal year to date):

Item 1-4: For each well class, enter the number of times that wells have received remedial action.

Paperwork Reduction Act

Apparoval Expires 4/30/22

SEPA

March 08, 2019

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System Part III: Inspections Mechanical Integrity Testing (This information is solicited under the

I. Name and Address of Reporting Agency

U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard Chicago, IL 60604

Michigan DI Program

authority of the Safe Drinking Water Act) II. Date Prepared (month, day, year) III. State Contact (name, telephone no.)

IV. Reporting Period (month, year)

October 1, 2010

September 30, 2011

							Class and	Type of Inje	ction Wells		
							11				
			ltem		ĺ	SWD 2D	ER 2R	HC 2H	III	IV	v
	Total Wells	А	Number of Wells Inspected		3	50	45	0	0	0	117
V.			Number of Mechanical Integrity (MIT) Witnessed	/ Tests	1	44	45	0	0	0	0
Summary			2.Number of Emergency Response Complaint Response Inspection		0	0	0	0	0	0	0
of	Total Inspections	В	Number of Well Constructions Witnessed	1.2	0	0	0	0	0	0	0
Inspections			4. Number of Well Pluggings Witnessed		0	0	0	0	0	0	0
			5. Number of Routine/Periodic Inspections		2	6	0	0	0	0	1
	Total	A	Number of Wells Tested or Evalu for Mechanical Integrity (MI)		0	0	0	0	0	0	0
	Total Wells	В	No. of Rule-Authorized Wells Tested/Evaluated for MIs	Passed 2-part test Failed 2-part test	0	0	0	0	0	0	0
		<u> </u>			0	0	0	0		0	
		ł	Number of Annulus Pressure Monitoring Record Evaluations	Well Passed	0	0	0	. 0			0
. 20	/I. For Tubing Pressure Tests mary Significant C	Well Failed Well Passed	0	0	0	0		<u> </u>	0		
VI.		Well Failed	0	0	0	0			0		
Summary		Well Passed	0	0	0	0	ļ	 	0		
of	Leak		Record Evaluations	Well Failed	0	0	0	0	0	ļ	0
NA - to - to - t			4. No. of Other Significant Leak	Well Passed	0	0	0	0	0	0	0
Mechanical			Tests/Evaluations (Specify)	Well Failed	0	0	0	0	0	0	0
Integrity			1, Number of Cement	Well Passed	0	0	0	0	0	0	0
(MI)			Record Evaluations	Well Failed	0	0	0	0	0	0	0
V:)			2. Number of Temperature/	Well Passed	0	0	0	0	0	0	0
	For Fluid	D	Noise Log Tests	Well Failed	0	0	0	0	0	0	0
	Migration		3. No. of Radioactive Tracer/ Cement Bond Tests	Well Passed	0	0	0	0	 	 	0
				Well Failed	0	0	0	0	 	 	0
			4. No. of Other Fluid Migration Tests/Evaluations (Specify)	Well Passed	0	0	0	0			0
		+		Well Failed	0	0	0	0	0	0	0
	Total Wells	A	Number of Wells with Remedial Action								<u> </u>
VII.			Number of Casing Repaired/ Squeeze Cement Remedial Ac	tions							<u> </u>
Summary of Remedial Action	Total Remedial	В	Number of Tubing/Packer Remedial Actions								
	Actions	1 1	Number of Plugging/Abandoni Remedial Actions								
			4. Number of Other Remedial Ac (Specify)	tions							

VIII. Remarks/Ad Hoc Report (Attach additional sheets)

Certification

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Signature and Type	ed or Printed Name a	and Title of Person	Completing Form

Date

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Section V. Summary of Inspections

A complete inspection should include an assessment of: the well head, pressure and flow meters, pipeline connections, and any other equipment associated with the injection system. An inspection is complete only when a report has been filed with the primacy agency.

Item A: For each well class, enter the number of wells that have been inspected as of the end of the reporting period. Enter each well only once.

Total Inspections (this federal fiscal year to date):

Item 1: For each well class, enter the number of inspections to witness field Mechanical Integrity Tests. (At least 25% of MITs performed by operators each year should be witnessed.)

Item 2: For each well class, enter the number of inspections that have been in response to a problem reported to the regulating authority.

Item 3: For each well class, enter the number of inspections of well constructions or any preoperational activities.

Item 4: For each well class, enter the number of inspections of plugging and abandonment.

Item 5: For each well class, enter the number of inspections that have been routine / periodic.

Section VI. Summary of Mechanical Integrity

A complete MIT is composed of a test for significant leaks in the casing, tubing or packer and a test for significant fluid migration into a USDW through vertical channels adjacent to the well bore. An MIT consists of a field test on a well or an evaluation of a well's monitoring records (i.e., annulus pressure, etc.) or cement records. At a minimum, the mechanical integrity of a Class I, II, or III (solution mining of salt) well should be demonstrated at least once every five years during the life of the well.

Item A: For each well class, enter the total number of wells (i.e., permitted and rule authorized) that have had a complete MIT this federal fiscal year to date. Enter each well only once.

Item B: For each well class, enter the number of rule authorized wells that have passed a complete MIT and the number that have failed a complete MIT this federal fiscal year to date.

EPA Form 7520-3 (Rev. 4-19) Revised

Item C: Significant Leak Tests: (this federal fiscal year to date)

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for significant leaks.

Item D: Fluid Migration Tests (this federal fiscal year to date):

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for fluid migration.

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Total Remedial Actions: (this federal fiscal year to date):

Item 1-4: For each well class, enter the number of times that wells have received remedial action.

Paperwork Reduction Act

Approval Expires 4/30/22

Telephone No.

SEPA

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460 UIC Federal Reporting System

UIC Federal Reporting System
Part III: Inspections
Mechanical Integrity Testing

(This information is solicited under the authority of the Safe Drinking Water Act)

I. Name and Address of Reporting Agency

U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard Chicago, IL 60604

Michigan DI Program

II. Date Prepared (month, day, year) III. State Contact (name, telephone no.) IV. Reporting Period (month, year)

March 08, 2019

October 1, 2011 To September 30, 2012

						Class and Type of Injection						
					[- 11				
			Item			1	SWD 2D	ER 2R	HC 2H	111	IV	v
	Total Wells	Α	Number of Wells Inspected			9	250	165	0	0	0	1
V.			Number of Mechanical Integrit (MIT) Witnessed	y Tests		7	211	153	0	0	0	1
Summary			2.Number of Emergency Respon- Complaint Response Inspection			0	0	0	0	0	0	0
of	Total Inspections	В	Number of Well Constructions Witnessed			0	0	0	0.	. 0	0	0
Inspections			4. Number of Well Pluggings Witnessed			0	0	0	0	0	0	0
		_	5. Number of Routine/Periodic Inspections			2	30	12	0	0	0	870
	Total	Α	Number of Wells Tested or Evalu for Mechanical Integrity (MI)	·		5	174	139	0	0	0	1
	Wells	В	No. of Rule-Authorized Wells Tested/Evaluated for Mis	Passed 2-pa		0	0	58 0	0	0	0	0
		┼	Number of Annulus Pressure	Mali	Passed	0	0	0	0	0		0
Summary Signifi			Monitoring Record Evaluation	_	Failed	0	0	0	0	0	ļ	0
			2. No. of Casing/		Passed	6	208	146	0	0	0	1
	For		Tubing Pressure Tests	Well	Failed	0	3	7	0	0	0	0
	Significant Leak	C	3. Number of Monitoring	Well	Passed	0	0	0	0	0	0	0
of	Leak		Record Evaluations	Well I	Failed	0	0	0	0	0	0	0
Mechanical			4. No. of Other Significant Leak	Well	Passed	0	0	0	0	0	0	0
Wechanical	1		Tests/Evaluations (Specify)	Well 1	Failed	0	0	0	0	0		0
Integrity			1. Number of Cement	Well I	Passed	0	0	0	0	0	0	0
(MI)			Record Evaluations	Well	Failed	0	0	0	0	0	0	0
()			2. Number of Temperature/	Well	Passed	0	0	0	0	0	0	0
	For Fluid	D	Noise Log Tests	Well	Failed	0	0	0	0	0	0	0
	Migration		3. No. of Radioactive Tracer/	Well	Passed	0	0	0	0	0	0	0
			Cement Bond Tests	Well	Failed	0	0	0	0	0 ,	IV 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0
			4. No. of Other Fluid Migration Tests/Evaluations (Specify)		Passed	0	0	0	0	0		0
	<u> </u>	4_		Well	Failed	0	0	0	0	0	0	0
	Total Wells	A	Number of Wells with Remedial Action									
VII. Summary of Remedial Action			Number of Casing Repaired/ Squeeze Cement Remedial Ac	ctions								
	Total Remedial	В	2. Number of Tubing/Packer Remedial Actions									<u> </u>
	Actions	ons	3. Number of Plugging/Abandon Remedial Actions							ļ		ļ
			4. Number of Other Remedial Actions (Specify)									

VIII. Remarks/Ad Hoc Report (Attach additional sheets)

Certification

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Signature and Typed or Printed Name and Title of Person Completing Form	Date
	ł

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Item A: For each well class, enter the number of wells that have been inspected as of the end of the reporting period. Enter each well only once.

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Section VI. Summary of Mechanical Integrity

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EPA Form 7520-3 (Rev. 4-19) Revised

Item C: Significant Leak Tests: (this federal fiscal year to date)

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for significant leaks.

Item D: Fluid Migration Tests (this federal fiscal year to date):

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for fluid migration.

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Paperwork Reduction Act

OMB No. 2040-0042 Approval Expires 4/30/22

I. Name and Address of Reporting Agency U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System Part III: Inspections Mechanical Integrity Testing

Michigan DI Program

(This information is solicited under the authority of the Safe Drinking Water Act) Chicago, IL 60604

li. Date Prepared (month, day, year) III. State Contact (name, telephone no.) IV. Reporting Period (month, year) July 09, 2019

September 30, 2013 October 1, 2012

							(Class and	ype of Inje	ction Wells		
								- 11				•
		Item		ı	SWD 2D	ER 2R	HC 2H	111	IV	V		
	Total Wells	Α	Number of Wells Inspected			4	118	124	0	1	0	1007
· V.			Number of Mechanical Integrity (MIT) Witnessed		4	108	124	0	1	0	4	
Summary			2.Number of Emergency Response Complaint Response Inspection			0	0	0	0	0	0	0
of	Total Inspections	В	Number of Well Constructions Witnessed			0	0	0	0	0	0	0
Inspections			4. Number of Well Pluggings Witnessed		0	0	0	0	0	0	50	
			5. Number of Routine/Periodic Inspections			2	11	3	0	0	0	0
	Total	A	Number of Wells Tested or Evalu for Mechanical Integrity (MI)			22	159	193	0	10	0	5
	Wells B No. of Rule-Authorized Wells Tested/Evaluated for Mis			d 2-part test 2-part test	0	0	112	0	0	0	0	
		ļ		<u> </u>		0	0	4	0	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0	
\a			1. Number of Annulus Pressure Monitoring Record Evaluations		Well Passed	0	0	1	0			0
			2. No. of Casing/	'	Well Failed Well Passed	26	0 162	0 199	0			0
VI.			Tubing Pressure Tests	<u> </u>	Well Failed	0	3	4	0			0
Summary		C	3. Number of Monitoring		Well Passed	0	0	0	0			0
of	Leak		Record Evaluations	ļ	Well Failed	0	0	0	0		0	0
			4. No. of Other Significant Leak		Well Passed	0	0	0	0	1	0	0
Mechanical			Tests/Evaluations (Specify)	Ī	Well Failed	0	0	0	0	0	0	0
Integrity			1, Number of Cement	1	Well Passed	0	0	0	0	0	0	0
(MI)			Record Evaluations	Ţ.	Well Failed	0	0	0	0	0	0	0
(****)	ļ		2. Number of Temperature/	,	Well Passed	6	1	1	0	4	0	1
	For Fluid	D	Noise Log Tests	,	Well Failed	0	0	0	0	0	0	0
	Migration		3. No. of Radioactive Tracer/	Ľ	Well Passed	0	0	0	0	0	0	0
		1	Cement Bond Tests		Well Failed	0	0	0	0	0		0
			4. No. of Other Fluid Migration Tests/Evaluations (Specify)	-	Well Passed	0	0	0	0	<u> </u>		0
		<u> </u>			Well Failed	0	0	0	0	0	0	0
	Total Wells	A	Number of Wells with Remedial Action			0	4	6	0	0	0	0
VII.			Number of Casing Repaired/ Squeeze Cement Remedial Ac	ctions		0	0	2	0	0	0	0
Summary of Remedial Action	Total Remedial	В	2. Number of Tubing/Packer Remedial Actions			0	4	4	0	0	0	0
	Actions	Actions	3. Number of Plugging/Abandonment Remedial Actions		0	0	0	0	0	0	0	
			Number of Other Remedial Actions (Specify)		0	0	0	0	0	0	0	

VIII. Remarks/Ad Hoc Report (Attach additional sheets)

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EPA Form 7520-3 (Rev. 4-19) Revised

Item C: Significant Leak Tests: (this federal fiscal year to date)

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for significant leaks.

Item D: Fluid Migration Tests (this federal fiscal year to date):

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for fluid migration.

Section VII. Summary of Remedial Action

A failure of mechanical integrity (MI) may occur at any time during the life of an injection well. Failure may be identified during an inspection, a field test, an evaluation of well records, or during routine operation of a well. Remedial actions include additional permit conditions, monitoring, or testing.

Item A: For each well class, enter the number of wells that have received remedial actions this federal fiscal year to date. Enter each well only once.

Total Remedial Actions: (this federal fiscal year to date):

Item 1-4: For each well class, enter the number of times that wells have received remedial action.

Paperwork Reduction Act

OMB No. 2040-0042 Approval Expires 4/30/22

\$EPA

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System
Part III: Inspections
Machanical Integrity Testing

Mechanical Integrity Testing (This information is solicited under the authority of the Safe Drinking Water Act) I. Name and Address of Reporting Agency

U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard

Chicago, IL 60604

Michigan DI Program

II. Date Prepared (month, day, year)

July 10, 2019

III. State Contact (name, telephone no.) IV. Reporting Period (month, year)

From

October 1, 2013

September 30, 2014

							Class and	Type of Inje	ction Wells		
							ll .				
			Item		ŧ	SWD 2D	ER 2R	HC 2H	111	IV	V
	Total Wells	А	Number of Wells Inspected		2	111	88	0	0	0	311
V.			Number of Mechanical Integrity (MIT) Witnessed	y Tests	1	97	88	0	0	0	0
Summary			2.Number of Emergency Respon- Complaint Response Inspection		0	0	0	0	0	0	0
of	Total Inspections	В	3. Number of Well Constructions Witnessed	0	0	0	0	0	0	0	
Inspections			Number of Well Pluggings Witnessed		0	0	0	0	0	0	54
			5. Number of Routine/Periodic Inspections		4	15	5	0	0	0	2
	Tetal	Α	Number of Wells Tested or Evalu for Mechanical Integrity (MI)	,	21	157	131	0	11	0	2
	Total Wells	В	No. of Rule-Authorized Wells Tested/Evaluated for Mis	Passed 2-part test	0	0	59	0	0	0	0
		ļ		Failed 2-part test	0	0	1	0	0	0.	0
			Number of Annulus Pressure Monitoring Record Evaluations	Well Passed	0	0	0	0	0		0
VI. Summary Si		-		vveii railed	0	0	0	0	0		0
	F		2. No. of Casing/ Tubing Pressure Tests	Well Passed	23	160	135	0	6		3
	For Significant	С		Well Failed	0	3	5	0	0		0
_	Leak	1	Number of Monitoring Record Evaluations	Well Passed	0	0	0	0	0		0
of				Well Failed	0	0	0	0	0		0
Mechanical		ļ	4. No. of Other Significant Leak Tests/Evaluations (Specify)	Well Passed	0	0	0	0	4		0
		1		Well Failed	0	0	0	0	0		0
Integrity	J		Number of Cement Record Evaluations	Well Passed	0	0	0	0	0		0
(MI)				Well Failed	0	0	0	0	0		0
			2. Number of Temperature/ Noise Log Tests	Well Passed	4	1	3	0	4		0
	For Fluid	D		Well Failed	0	0	0	0	0		0
	Migration		3. No. of Radioactive Tracer/ Cement Bond Tests	Well Passed	0	0	0	0	0		0
				Well Failed	0	0	0	0	0		0
			4. No. of Other Fluid Migration Tests/Evaluations (Specify)	Well Passed	0	0	0	0	0		0
	<u> </u>	-		Well Failed	0	0	0	0	0	0	0
	Total Wells	A	Number of Wells with Remedial Action		0	1	1	0	0	0	1
VII. Summary of Remedial Action			Number of Casing Repaired/ Squeeze Cement Remedial Ac	tions	0	0	0	0	0	0	0
	Total Remedial	В	Number of Tubing/Packer Remedial Actions		0	1	1	0	0		1
	Actions		Number of Plugging/Abandon Remedial Actions	ment	0	0	0	0	0	0	0
			4. Number of Other Remedial Ac (Specify)	tions	0	0	0	0	0	0	0

VIII. Remarks/Ad Hoc Report (Attach additional sheets)

Certification

I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature and Typed or Printed Name and Title of Person Completing Form

Date

All reporting is cumulative over the fiscal year, and includes activities from October 1 - September 30. All fields should contain a value. Do not leave blank fields. Enter 0 if there are no wells affected or no activities that occurred pertaining to the information requested. Enter NA if the field or section is not applicable to the submitter (e.g., the well type is not overseen by the submitter). Enter U if the information is unknown or not captured; fields designated as U require explanation.

Section V. Summary of Inspections

A complete inspection should include an assessment of: the well head, pressure and flow meters, pipeline connections, and any other equipment associated with the injection system. An inspec-tion is complete only when a report has been filed with the primacy agency.

Item A: For each well class, enter the number of wells that have been inspected as of the end of the reporting period. Enter each well only once.

Total Inspections (this federal fiscal year to date):

Item 1: For each well class, enter the number of inspections to witness field Mechanical Integrity Tests. (At least 25% of MITs performed by operators each year should be witnessed.)

Item 2: For each well class, enter the number of inspections that have been in response to a problem reported to the regulating authority.

Item 3: For each well class, enter the number of inspections of well constructions or any preoperational activities.

Item 4: For each well class, enter the number of inspections of plugging and abandonment.

Item 5: For each well class, enter the number of inspections that have been routine / periodic.

Section VI. Summary of Mechanical Integrity

A complete MIT is composed of a test for significant leaks in the casing, tubing or packer and a test for significant fluid migration into a USDW through vertical channels adjacent to the well bore. An MIT consists of a field test on a well or an evaluation of a well's monitoring records (i.e., annulus pressure, etc.) or cement records. At a minimum, the mechanical integrity of a Class I, II, or III (solution mining of salt) well should be demonstrated at least once every five years during the life of the well.

Item A: For each well class, enter the total number of wells (i.e., permitted and rule authorized) that have had a complete MIT this federal fiscal year to date. Enter each well only once.

Item B: For each well class, enter the number of rule authorized wells that have passed a complete MIT and the number that have failed a complete MIT this federal fiscal year to date.

EPA Form 7520-3 (Rev. 4-19) Revised

Item C: Significant Leak Tests: (this federal fiscal year to date)

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for significant leaks.

Item D: Fluid Migration Tests (this federal fiscal year to date):

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for fluid migration.

Section VII. Summary of Remedial Action

A failure of mechanical integrity (MI) may occur at any time during the life of an injection well. Failure may be identified during an inspection, a field test, an evaluation of well records, or during routine operation of a well. Remedial actions include additional permit conditions, monitoring, or testing.

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Total Remedial Actions: (this federal fiscal year to date):

Item 1-4: For each well class, enter the number of times that wells have received remedial action.

Paperwork Reduction Act

Approval Expires 4/30/22

\$EPA

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System
Part III: Inspections

Mechanical Integrity Testing (This information is solicited under the authority of the Safe Drinking Water Act) I. Name and Address of Reporting Agency

U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard Chicago, IL 60604

Michigan DI Program

II. Date Prepared (month, day, year)

March 08, 2019

III. State Contact (name, telephone no.) IV. Reporting Period (month, year)

From

October 1, 2014

September 30, 2015

			· · · · · · · · · · · · · · · · · · ·				Class and	Type of Ini	ection Wells		
							II	1300 01 1113	1		
						SWD	ER	HC	1		
			Item		ı	2D	2R	2H	111	IV	ν
	Total Wells	Α	Number of Wells Inspected		6	115	104		1		14
v. (Number of Mechanical Integrity (MIT) Witnessed	y Tests	0	108	107		1		1
Summary			2.Number of Emergency Respon- Complaint Response Inspection		0	0	1		0		0
of	Total Inspections	В	Number of Well Constructions Witnessed		0	0	0 0 0	0		0	
Inspections			Number of Well Pluggings Witnessed		0	0	0		0		1
			5. Number of Routine/Periodic Inspections		8	12	3		0		5
	Total	A	Number of Wells Tested or Evalu for Mechanical Integrity (MI)		23	153	123		21		12
	Wells	В	No. of Rule-Authorized Wells Tested/Evaluated for Mis	Passed 2-part test	0	1	67		0		0
		$oxedsymbol{oxedsymbol{oxedsymbol{oxed}}}$		Failed 2-part test	0	0	2		1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0	
			Number of Annulus Pressure Monitoring Record Evaluations	Well Passed	0	0	0				0
ļ	VI. 2. No. of Casing/ Tubing Pressure Tests		vven raneu	0	0	0				0	
VI.		Well Passed	27	159	127		 		8		
Summary		Well Failed	0	2	6				0		
	Leak		Number of Monitoring Record Evaluations	Well Passed	0	0	0				0
of				Well Failed	0	0	0			····	0
Mechanical			4, No. of Other Significant Leak Tests/Evaluations (Specify)	Well Passed	0	0	0				0
t - t t		1		Well Failed	0	0	0				0
Integrity			Number of Cement Record Evaluations	Well Passed	0	0	0				0
(MI)				Well Failed	0	0	0				0
	For		2. Number of Temperature/ Noise Log Tests	Well Passed	5	1	1				12
	Fluid	D		Well Failed	0	0	0	ļ	 		0
	Migration		3. No. of Radioactive Tracer/ Cement Bond Tests	Well Passed		0	0	ļ			0
				Well Failed	0	0	0				0
			4. No. of Other Fluid Migration Tests/Evaluations (Specify)	Well Passed	0	1	0				0
	ļ	4		Well Failed	0	0	0		0		0
	Total Wells	A	Number of Wells with Remedial Action		0	1	0		0		0
VII. Summary of Remedial Action			Number of Casing Repaired/ Squeeze Cement Remedial Ac	tions	0	0	0		0		0
	Total Remedial	В	2. Number of Tubing/Packer Remedial Actions	**************************************	0	1	0		0		0
	Actions		Number of Plugging/Abandon Remedial Actions	ment	0	0	0		0		0
			Number of Other Remedial Act (Specify)	tions	0	0	0		0		0

VIII. Remarks/Ad Hoc Report (Attach additional sheets)

Certification

I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature and Typed or Printed Name and Title of Person Completing Form

Date

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Section V. Summary of Inspections

A complete inspection should include an assessment of: the well head, pressure and flow meters, pipeline connections, and any other equipment associated with the injection system. An inspec-tion is complete only when a report has been filed with the primacy agency.

Item A: For each well class, enter the number of wells that have been inspected as of the end of the reporting period. Enter each well only once.

Total Inspections (this federal fiscal year to date):

Item 1: For each well class, enter the number of inspections to witness field Mechanical Integrity Tests. (At least 25% of MITs performed by operators each year should be witnessed.)

Item 2: For each well class, enter the number of inspections that have been in response to a problem reported to the regulating authority.

Item 3: For each well class, enter the number of inspections of well constructions or any preoperational activities.

Item 4: For each well class, enter the number of inspections of plugging and abandonment.

Item 5: For each well class, enter the number of inspections that have been routine / periodic.

Section VI. Summary of Mechanical Integrity

A complete MIT is composed of a test for significant leaks in the casing, tubing or packer and a test for significant fluid migration into a USDW through vertical channels adjacent to the well bore. An MIT consists of a field test on a well or an evaluation of a well's monitoring records (i.e., annulus pressure, etc.) or cement records. At a minimum, the mechanical integrity of a Class I, II, or III (solution mining of salt) well should be demonstrated at least once every five years during the life of the well.

Item A: For each well class, enter the total number of wells (i.e., permitted and rule authorized) that have had a complete MIT this federal fiscal year to date. Enter each well only once.

Item B: For each well class, enter the number of rule authorized wells that have passed a complete MIT and the number that have failed a complete MIT this federal fiscal year to date.

EPA Form 7520-3 (Rev. 4-19) Revised

Item C: Significant Leak Tests: (this federal fiscal year to date)

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for significant leaks.

Item D: Fluid Migration Tests (this federal fiscal year to date):

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for fluid migration.

Section VII. Summary of Remedial Action

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Item A: For each well class, enter the number of wells that have received remedial actions this federal fiscal year to date. Enter each well only once.

Total Remedial Actions: (this federal fiscal year to date):

Item 1-4: For each well class, enter the number of times that wells have received remedial action.

Paperwork Reduction Act

OMB No. 2040-0042 Approval Expires 4/30/22

\$EPA

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System
Part III: Inspections
Mechanical Integrity Testing

(This information is solicited under the authority of the Safe Drinking Water Act)

I. Name and Address of Reporting Agency

U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard Chicago, IL 60604

Michigan DI Program

authority of the Safe Drinking Water Act)

II. Date Prepared (month, day, year)

III. State Contact (name, telephone no.)

IV. Repo

March 08, 2019

IV. Reporting Period (month, year)

From

October 1, 2015

September 30, 2016

						,		Type of Inje	ection Wells	·	
							11				
			Item			SWD 2D	ER 2R	HC 2H	111	IV	٧
	Total Wells	А	Number of Wells Inspected		3	97	77	0	0	0	5
٧.			Number of Mechanical Integrity (MIT) Witnessed	/ Tests	1	98	79	0	0	0	1
Summary			2.Number of Emergency Response or Complaint Response Inspections		0	0	0	0	0	0	0 5
of	Total Inspections	В	Number of Well Constructions Witnessed		0	0	0	0	0	0	0
Inspections			4. Number of Well Pluggings Witnessed		0	0	0	0	0	0	0
			5. Number of Routine/Periodic Inspections		0	- 1	0	0	0	0	3
	Tatal	A	Number of Wells Tested or Evalu for Mechanical Integrity (MI)	T	21	149	108	0	12	0	5
ļ	Total Wells	В	No. of Rule-Authorized Wells Tested/Evaluated for MIs	Passed 2-part test	 	0	67	0	0		
			***************************************	Failed 2-part test	0	0	2	0	0 0 1 0 0 0 1 0 0 0		
			Number of Annulus Pressure Monitoring Record Evaluations	Well Passed		0	0	0			
\ r				well railed	0	0	0	0			
VI.		2. No. of Casing/ Tubing Pressure Tests	Well Passed		151	109	0	 			
	Significant	c		Well Failed	0	2	2 .	0			
	Leak		3. Number of Monitoring Record Evaluations	Well Passed		0	0	0	 		
of				Well Failed Well Passed	0	0	0	0			
Mechanical		-	4. No. of Other Significant Leak Tests/Evaluations (Specify)	Well Failed	0	0	0	0			
Integrity		+	1. Number of Cement	Well Passed		0	0	0			
			Record Evaluations	Well Failed	0	0	0	0			
(MI)			2. Number of Temperature/	Well Passed	 	2	0	0			
	For		Noise Log Tests	Well Failed	0	0	0	0	 	ļ	
	Fluid	D	3. No. of Radioactive Tracer/	Well Passed		0	0	0	 		 -
	Migration		Cement Bond Tests	Well Failed	0	0	0	0	0	0	0
	1		4. No. of Other Fluid Migration	Well Passed	0	2	0	0	0	IV	0
			Tests/Evaluations (Specify)	Well Failed	0	0	0	0	0	0	0
	Total Wells	Α	Number of Wells with Remedial Action		1	0	2	0	1	0	0
VII. Summary of Remedial Action			Number of Casing Repaired/ Squeeze Cement Remedial Act	tions	0	0	0	0	0	0	0
	Total	Ь	Number of Tubing/Packer Remedial Actions		0	0	1	0	1	0	0
	Actions	Remedial B Actions	3. Number of Plugging/Abandon Remedial Actions	ment	0	0	0	0	0	0	0
		4. Number of Other Remedial Actions (Specify)		1	0	1	0	0	0	0	

VIII. Remarks/Ad Hoc Report (Attach additional sheets)

Certification

I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature and Typed or Printed Name and Title of Person Completing Form

Date

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Item 4: For each well class, enter the number of inspections of plugging and abandonment.

Item 5: For each well class, enter the number of inspections that have been routine / periodic.

Section VI. Summary of Mechanical Integrity

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Item B: For each well class, enter the number of rule authorized wells that have passed a complete MIT and the number that have failed a complete MIT this federal fiscal year to date.

EPA Form 7520-3 (Rev. 4-19) Revised

Item C: Significant Leak Tests: (this federal fiscal year to date)

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for significant leaks.

Item D: Fluid Migration Tests (this federal fiscal year to date):

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for fluid migration.

Section VII. Summary of Remedial Action

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Paperwork Reduction Act

OMB No. 2040-0042 Appro

Approval Expires 4/30/22

SEPA

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System
Part III: Inspections

Mechanical Integrity Testing (This information is solicited under the authority of the Safe Drinking Water Act) I. Name and Address of Reporting Agency

U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard

Chicago, IL 60604

Michigan DI Program

II. Date Prepared (month, day, year)

March 08, 2019

III. State Contact (name, telephone no.)

IV. Reporting Period (month, year)

From

October 1, 2016

September 30, 2017

						Class and Type of Injection Wells					
			Item		ı	SWD 2D	ER 2R	HC 2H	111	IV	ν
	Total Wells	Α	Number of Wells Inspected		1	51	55	-	0	0	1
V			Number of Mechanical Integrit (MIT) Witnessed	y Tests	1	52	57		0	0	0
V. Summary			2.Number of Emergency Respon- Complaint Response Inspection		0	0	0		0	0	0
of	Total Inspections	В	3. Number of Well Constructions Witnessed		0	0	0		0	0	0
Inspections			4. Number of Well Pluggings Witnessed	0	0	0		0	0	0	
			5. Number of Routine/Periodic Inspections		0	0	0		0	0	1
	-	А	Number of Wells Tested or Evalutor Mechanical Integrity (MI)	ated	6	108	77		1	0	0
	Total Wells B No. of Rule-Authorized Wells Tested/Evaluated for Mis		Passed 2-part test	ļ	0	39		0	0	0	
		<u> </u>		Failed 2-part test	0	0	1		0 0 0 0 0 0 0 0 0 0 0 0 0 1 0 0 0 0 0 0	0	
			Number of Annulus Pressure Monitoring Record Evaluation	Well Passed	 	0	0				0
		vveii railed	0	0	0				0		
VI.		Well Passed	+	114	77			ļ	0		
Summary Signific	Significant	С		Well Failed	0	0	2				0
, -	Leak		Number of Monitoring Record Evaluations	Well Passed		0	1				0
of				Well Failed	0	0	0				0
Mechanical			4. No. of Other Significant Leak Tests/Evaluations (Specify)	Well Passed	 	0	0			<u> </u>	0
Integrity	ļ	+	1. Number of Cement	Well Passed	0	0	0				0
			Record Evaluations	Well Failed	0	0	0				0
(MI)			2. Number of Temperature/	Well Passed	+	0	0				0
	For		Noise Log Tests	Well Failed	0	0	0		 		0
	Fluid	D	3. No. of Radioactive Tracer/	Well Passed	 	0	0		 	<u> </u>	0
	Migration		Cement Bond Tests	Well Failed	0	0	0			0	0
	1		4. No. of Other Fluid Migration	Well Passed	ļ <u>-</u>	1	0		ļ	O O O O O O O O O O O O O O O O O O O	0
			Tests/Evaluations (Specify)	Well Failed	0	0	0		0	0	0
	Total Wells	А	Number of Wells with Remedial Action	L	1	3	0		0	0	0
VII.			Number of Casing Repaired/ Squeeze Cement Remedial Ac	tions	0	0	0		0	0	0
VII. Summary of Remedial Action	Total		Number of Tubing/Packer Remedial Actions		2	3	0		0	0	0
	Actions	Remedial B	Number of Plugging/Abandon Remedial Actions	ment	0	0	0		0	0	0
		4. Number of Other Remedial Actions (Specify)		0	0	0		0	0	0	

VIII. Remarks/Ad Hoc Report (Attach additional sheets)

Certification

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Item 5: For each well class, enter the number of inspections that have been routine / periodic.

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Item B: For each well class, enter the number of rule authorized wells that have passed a complete MIT and the number that have failed a complete MIT this federal fiscal year to date.

EPA Form 7520-3 (Rev. 4-19) Revised

Item C: Significant Leak Tests: (this federal fiscal year to date)

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for significant leaks.

Item D: Fluid Migration Tests (this federal fiscal year to date):

Items 1-4: For each well class, enter the number of times wells have passed or failed a field test/record evaluation for fluid migration.

Section VII. Summary of Remedial Action

A failure of mechanical integrity (MI) may occur at any time during the life of an injection well. Failure may be identified during an inspection, a field test, an evaluation of well records, or during routine operation of a well. Remedial actions include additional permit conditions, monitoring, or testing.

Item A: For each well class, enter the number of wells that have received remedial actions this federal fiscal year to date. Enter each well only once.

Total Remedial Actions: (this federal fiscal year to date):

Item 1-4: For each well class, enter the number of times that wells have received remedial action.

Paperwork Reduction Act

OMB No. 2040-0042 Approva

Approval Expires 4/30/22

SEPA

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System
Part III: Inspections

Mechanical Integrity Testing (This information is solicited under the authority of the Safe Drinking Water Act) I. Name and Address of Reporting Agency

U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard Chicago, IL 60604

Michigan DI Program

II. Date Prepared (month, day, year)
April 10, 2019

III. State Contact (name, telephone no.) Jill Dean 2025648241 IV. Reporting Period (month, year)

From

October 1, 2017

September 30, 2018

							Class and	Type of Inje	ction Wells			
							11					
			item		ı	SWD 2D	ER 2R	HC 2H	111	IV	٧	
	Total Wells	Α	Number of Wells Inspected		7	26	38	0	4	0	106	
.,	1. Numb		Number of Mechanical Integrity (MIT) Witnessed	/ Tests	7	26	38	0	4	0	2	
V. Summary			2.Number of Emergency Respons Complaint Response Inspectio		0	0	0	0	0	0	0	
of	Total Inspections	В	3. Number of Well Constructions Witnessed		0	0	0	0	0	0	0	
Inspections			4. Number of Well Pluggings Witnessed		0	0	0	0	0	0	0	
			5. Number of Routine/Periodic Inspections		0	0	0	0	0	0	106	
		Α	Number of Wells Tested or Evalu for Mechanical Integrity (MI)	ated	0	112	109	0	0	0	. 4	
	Total Wells	В	No. of Rule-Authorized Wells Tested/Evaluated for Mis	Passed 2-part test	0	0	0	0	0	0	0	
				Failed 2-part test	0	0	0	0	0	0	0	
	1. Number of Annulus Pressure Monitoring Record Evaluation		Well Passed	0	0	0	0	0	0	0		
!			vven raned	0	0	0	0	0	0	0		
VI.	For		2. No. of Casing/ Tubing Pressure Tests	Well Passed	6	110	108	0	5	0	3	
Summary	Significant	С		Well Failed	0	0	0	0	0	0	0	
of	Leak		3. Number of Monitoring Record Evaluations	Well Passed Well Failed	0	0	0	0	0	0	0	
O1			4, No. of Other Significant Leak	Well Passed	0	2	1	0	1	0	0	
Mechanical			Tests/Evaluations (Specify)	Well Failed	0	0	0	0	0	0	0	
Integrity		┼─	1. Number of Cement	Well Passed	0	1 0	0	0	0	0	0	
do and			Record Evaluations	Well Failed	0	0	0	0	0	0	0	
(MI)			2. Number of Temperature/	Well Passed	2	0	0	0	6	0	1	
	For		Noise Log Tests	Well Failed	0	0	0	0	0	0	0	
	Fluid Migration	D	3. No, of Radioactive Tracer/	Well Passed	0	0	0	0	0	0	0	
	,gracion		Cement Bond Tests	Well Failed	0	0	0	0	0	0	0	
			4. No. of Other Fluid Migration	Well Passed	3	0	0	0	0	0	0	
			Tests/Evaluations (Specify)	Well Failed	0	0	0	0	0	0	0	
	Total Wells	Α	Number of Wells with Remedial Action		0	0	0	0	0	0	0	
VII.			Number of Casing Repaired/ Squeeze Cement Remedial Ac	tions	0	0	0	0	0	0	0	
VII. Summary of Remedial Action	Total Pemedial	P	2. Number of Tubing/Packer Remedial Actions		0	0	0	0	0	0	0	
	Remedial Actions		3. Number of Plugging/Abandonment Remedial Actions		0	0	0	0	0	0	0	
			4. Number of Other Remedial Ac (Specify)	tions	0	0	0	0	0	0	0	

VIII. Remarks/Ad Hoc Report (Attach additional sheets)

Certification

I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature and Typed or Printed Name and Title of Person Completing Form

Date

Notes

No.	of O	ther	Significant	Leak	Tests/Evaluations	(Sp	ecify)	

3 fall off tests, 1 brine interface for Class 3

SEPA

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System
Part II: Compliance Evaluation
(This information is solicited under the

(This information is solicited under the authority of the Safe Drinking Water Act)

I. Name and Address of Reporting Agency

U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard Chicago, IL 60604

Michigan DI Program

II. Date Prepared (month, day, year) III. State Contact (name, telephone no.) IV. Reporting Period (month, year) March 08, 2019 From October 1, 2009 September 30, 2010 Class and Type of Injection Wells SWD ER HC Item 2D 2R 2H Ш IV V Number of Wells with Violations 2 66 0 2 222 324 1. Number of Unauthorized 0 0 0 Injection Violations V. 2. Number of Mechanical Integrity Violations 51 79 0 2 0 Summary Number of Operation and 0 5 2 0 0 n Maintenance Violations Total of В Violations 4. Number of Plugging 0 0 0 0 0 0 and Abandonment Violations Violations 5. Number of Monitoring and 22 3 0 0 1 1 Reporting Violations 6. Number of Other Violations 48 1 0 0 221 (Specify) Number of Wells with 47 2 **Total Wells** 161 0 1 Enforcement Actions 1. Number of Notices of Violation 0 41 0 1 2. Number of Consent Agreements 0 0 0 0 0 VI. 3. Number of Administrative Orders 0 0 0 0 0 0 Summary 4. Number of Civil Referrals 0 0 0 0 0 0 Total Ωf Enforcement 5, Number of Criminal Referrals 0 0 0 0 0 0 Enforcement 6, Number of Well Shut-ins 19 41 0 2 0 7. Number of Pipeline Severances 0 0 0 0 0 0 8, Number of Other Enforcement Actions 0 0 0 0 0 0 (Specify) A. This Quarter Number of Wells Summary Returned to Compliance B. This Year 2 78 64 0 1 139 Compliance 0 0 0 0 0 0 Number of Cases of Alleged Contamination of a USDW Contamination 100 86 78 0 50 100 Percent of MIT Violations Resolved in 90 Days MIT Resolved X. Remarks/Ad Hoc Report (Attach additional sheets) Certification I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law. Date Signature and Typed or Printed Name and Title of Person Completing Form Telephone No.

Notes

Number of Other Violations (Specify)	
active 5x28, late MIT, TA>2y	



United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System Part II: Compliance Evaluation

(This information is solicited under the authority of the Safe Drinking Water Act)

I. Name and Address of Reporting Agency

U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard Chicago, IL 60604

Michigan DI Program

II. Date Prepared (month, day, year)
March 08, 2019

III. State Contact (name, telephone по.)

IV. Reporting Period (month, year)

October 1, 2010

Se

September 30, 2011

						,			1		
						Class and Type of Injection Wells					
							11				
			ltem		Ī	SWD 2D	ER 2R	HC 2H	111	ı٧	V
	Total Wells	A	Number of Wells v	vith Violations	0	13	2	0	0	0	26
			Number of Unate Injection Violati		0	0	0	0	0	0	0
V.	:		2. Number of Mec	nanical Integrity Violations	0	10	2	0	0	0	0
Summary of	Total		Number of Operat Maintenance Vi		0	0	0	0	0	0	0
Violations	Violations	В	4. Number of Plug and Abandonm		0	0	0	0	0	0	0
			5. Number of Mon Reporting Viola		0	3	0	0	0	0	0
			6. Number of Othe (Specify)	r Violations	0	0	0	0	0	0	0
	Total Wells	Α	Number of Wells v Enforcement Action		0	7	2	0	0	0	0
			1. Number of Noti	ces of Violation	0	7	2	0	0	0	0
			2. Number of Con	sent Agreements	0	0	0	0	0	0	0
VI.			3, Number of Adm	inistrative Orders	0	0	0	0	0	0	0
Summary of	Total Enforcement	В	4. Number of Civi	Referrals	0	0	0	0	0	0	0
Enforcement	Actions		5. Number of Crin	inal Referrals	0	0	0	0	0	0	0
			6. Number of Well	Shut-ins	0	10	0	0	0	0	0
			7. Number of Pipe	line Severances	0	0	0	0	0	0	0
			8. Number of Othe (Specify)	er Enforcement Actions	0	0,	0	0	0	0	0
VII. Summary	Number of Wel	is		A. This Quarter							
of Compliance	Returned to Co	mpli	ance	B. This Year	6	76	74	0	0	0	24
VIII. Contamination	Number of Cases of Alleged Contamination of a USDW		0	0	0 .	0	0	0	0		
IX. MIT Resolved	Percent of MIT Violations Resolved in 90 Days		100	50	100	100	100	100	100		

X. Remarks/Ad Hoc Report (Attach additional sheets)

Certification

I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature and Typed or Printed Name and Title of Person Completing Form

Date

All reporting is cumulative over the fiscal year, and includes activities from October 1 - September 30. All fields should contain a value. Do not leave blank fields. Enter 0 if there are no wells affected or no activities that occurred pertaining to the information requested. Enter NA if the field or section is not applicable to the submitter (e.g., the well type is not overseen by the submitter). Enter U if the information is unknown or not captured; fields designated as U require explanation.

A Class I, II, III, IV, or V injection well with a violation of a permit or rule requirement is said to be in noncompliance. Note: A well with certain types of violations may also be in significant noncompliance. (See Form 7520-2B (reverse) for definitions of SNC violations.)

Section V. Summary of Violations

(Includes all noncompliance; significant and non-significant)

A. Total Wells: For each well class, enter the number of wells with one or more violations in this federal fiscal year to date. Enter each well only once. Include all wells with violations, even those with violations that have been returned to compliance.

B. Total Violations:

Items 1-6: For each well class, enter the number of times each violation type has been identified this federal fiscal year to date.

Section VI. Summary of Enforcement

A. Total Wells: For each well class, enter the number of wells with one or more violations that have been addressed by the specific type of enforcement action in this federal fiscal year to date. Enter each well only once.

B. Total Enforcement Actions:

Items 1-8: For each well class, enter the number of times wells with one or more violations have been addressed by the specific type of enforcement action indicated in the row, in this federal fiscal year to date. (Count each draft and final Administrative Order.)

Section VII. Number of Wells Returned to Compliance

A "Well Returned to Compliance" is a well that has all underlying violations resolved and compliance has been verified by the primacy program. Note: An enforcement action alone (e.g., well shut-in) does not constitute a "return to compliance;" however, plugging and abandonment does constitute a return to compliance.

- A. For each well class, enter the number of wells returned to compliance through the second quarter for midyear reporting and through the fourth quarter for end of the year reporting.
- B. For each well class, enter the number of wells returned to compliance through the second quarter for midyear reporting and through the fourth quarter for end of the end of year reporting.

Section VIII. USDW Contaminations

For each well class, enter the number of times a well in noncompliance has allegedly contaminated an underground source of drinking water (USDW) this federal fiscal year to date.

Section IX. Percent of MIT Violations Resolved in 90 Days

For each well class, enter the percentage of MIT violations resolved within 90 days as of the end of the reporting period.

- Mechanical Integrity violations are as defined in Section V, under "Mechanical Integrity."
- Resolved is defined as returned to compliance (per Section VII).
- MI violations not associated with loss of mechanical integrity (such as reporting) are not counted under this section.
- Violations occurring WITHIN 90 days of September 30 should be included in reporting for the following federal fiscal year.

To calculate the percentage:

- Add up the total number of MIT violations that occurred within a one year period prior to 90 days before the end of the fiscal year reporting cycle i.e., 6/30.
- Add up the number of these violations that were resolved within 90 days as of 3/31(for midyear reporting) or as of 9/30 (for end of year reporting).
- Calculate the percentage of total MIT violations that were resolved in 90 days or less.

Example for Midyear reporting:

- Number of violations that occurred from 7/1 3/31 = 8
- Number of these violations resolved within 90 days as of 3/31 = 2
- Percentage of MIT violation resolved within 90 days = 25%

Example for End of Year reporting:

- Number of MIT violations that occurred from 7/1 6/30 = 10• 8 from midyear plus 2 additional (4/1 to 6/30)
- Number of these violations resolved within 90 days as of 9/30 = 5
 2 (from midyear) + 3 (from 4/1 to 6/30)
- Percentage of MIT resolved within 90 days by 9/30 = 50%

Paperwork Reduction Act

Approval Expires 4/30/22

SEPA

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System
Part II: Compliance Evaluation
(This information is solicited under the
authority of the Safe Drinking Water Act)

I. Name and Address of Reporting Agency
 U.S. Environmental Protection Agency Region 5
 77 West Jackson Boulevard

Chicago, IL 60604

Michigan DI Program

II. Date Prepared (month, day, year)
March 08, 2019

III. State Contact (name, telephone no.)

IV. Reporting Period (month, year)

October 1, 2011

September 30, 2012

					Class and Type of Injection Wells							
							11					
			ltem		1	SWD 2D	ER 2R	HC 2H	m	IV	V	
	Total Wells	А	Number of Wells	vith Violations	1	49	22	0	. 1	0	128	
			1. Number of Una Injection Violat		0	0	0	0	0	0	0	
V.			2. Number of Mec	hanical Integrity Violations	1	23	18	0	0	0	0	
Summary of	Total	В	Number of Operat Maintenance Vi		0	4	3	0	1	0	0	
Violations	Violations	В	4. Number of Plug and Abandonm		0	0	0	0	0	0	0	
			5. Number of Mon Reporting Viola		0	22	1	0	0	0	0	
			6. Number of Othe (Specify)	er Violations	0	0	0	0	0	0	128	
	Total Wells	A	Number of Wells Enforcement Acti		0	21	4	0	1	0	0	
			1. Number of Noti	ces of Violation	0	21	4	0	1	0	0	
		2. Numl		sent Agreements	0	0	0	0	0	0	0	
VI.			3, Number of Adn	ninistrative Orders	0	0	0	0	0	0	0	
Summary of	Total Enforcement	В	4, Number of Civi	l Referrals	0	0	0	0	0	0	0	
Enforcement	Actions		5. Number of Crir	ninal Referrals	0	0	0	0	0	0	0	
			6. Number of Wel	Shut-ins	0	0	0	0	0	0	0	
			7. Number of Pipe	eline Severances	0	0	0	0	0	0	0	
			8. Number of Oth (Specify)	er Enforcement Actions	0	0	0	0	0	0	0	
VII. Summary	Number of Wel			A. This Quarter								
of Compliance	Returned to Co	mpli	ance	B. This Year	1	38	13	0	0	0	0	
VIII. Contamination	Number of Cas	es of	Alleged Contamin	ation of a USDW	0	0	0	0	0	0	0	
IX. MIT Resolved	Percent of MIT Violations Resolved in 90 Days				100	100	100	100	100	100	0	

X. Remarks/Ad Hoc Report (Attach additional sheets)

Certification

I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature and Typed or Printed Name and Title of Person Completing Form

Date

All reporting is cumulative over the fiscal year, and includes activities from October 1 - September 30. All fields should contain a value. Do not leave blank fields. Enter 0 if there are no wells affected or no activities that occurred pertaining to the information requested. Enter NA if the field or section is not applicable to the submitter (e.g., the well type is not overseen by the submitter). Enter U if the information is unknown or not captured; fields designated as U require explanation.

A Class I, II, III, IV, or V injection well with a violation of a permit or rule requirement is said to be in noncompliance. Note: A well with certain types of violations may also be in significant noncompliance. (See Form 7520-2B (reverse) for definitions of SNC violations.)

Section V. Summary of Violations

(Includes all noncompliance; significant and non-significant)

A. Total Wells: For each well class, enter the number of wells with one or more violations in this federal fiscal year to date. Enter each well only once. Include all wells with violations, even those with violations that have been returned to compliance.

B. Total Violations:

Items 1-6: For each well class, enter the number of times each violation type has been identified this federal fiscal year to date.

Section VI. Summary of Enforcement

A. Total Wells: For each well class, enter the number of wells with one or more violations that have been addressed by the specific type of enforcement action in this federal fiscal year to date. Enter each well only once.

B. Total Enforcement Actions:

Items 1-8: For each well class, enter the number of times wells with one or more violations have been addressed by the specific type of enforcement action indicated in the row, in this federal fiscal year to date. (Count each draft and final Administrative Order.)

Section VII. Number of Wells Returned to Compliance

A "Well Returned to Compliance" is a well that has all underlying violations resolved and compliance has been verified by the primacy program. Note: An enforcement action alone (e.g., well shut-in) does not constitute a "return to compliance;" however, plugging and abandonment does constitute a return to compliance.

- A. For each well class, enter the number of wells returned to compliance through the second quarter for midyear reporting and through the fourth quarter for end of the year reporting.
- B. For each well class, enter the number of wells returned to compliance through the second quarter for midyear reporting and through the fourth quarter for end of the end of year reporting.

Section VIII. USDW Contaminations

For each well class, enter the number of times a well in noncompliance has allegedly contaminated an underground source of drinking water (USDW) this federal fiscal year to date.

Section IX. Percent of MIT Violations Resolved in 90 Days

For each well class, enter the percentage of MIT violations resolved within 90 days as of the end of the reporting period.

- Mechanical Integrity violations are as defined in Section V, under "Mechanical Integrity."
- Resolved is defined as returned to compliance (per Section VII).
- MI violations not associated with loss of mechanical integrity (such as reporting) are not counted under this section.
- Violations occurring WITHIN 90 days of September 30 should be included in reporting for the following federal fiscal year.

To calculate the percentage:

- Add up the total number of MIT violations that occurred within a one year period prior to 90 days before the end of the fiscal year reporting cycle i.e., 6/30.
- Add up the number of these violations that were resolved within 90 days as of 3/31(for midyear reporting) or as of 9/30 (for end of year reporting).
- Calculate the percentage of total MIT violations that were resolved in 90 days or less.

Example for Midyear reporting:

- Number of violations that occurred from 7/1 3/31 = 8
- Number of these violations resolved within 90 days as of 3/31 = 2
- Percentage of MIT violation resolved within 90 days = 25%

Example for End of Year reporting:

- Number of MIT violations that occurred from 7/1 6/30 = 10• 8 from midyear plus 2 additional (4/1 to 6/30)
- Number of these violations resolved within 90 days as of 9/30 = 5
 2 (from midyear) + 3 (from 4/1 to 6/30)
- Percentage of MIT resolved within 90 days by 9/30 = 50%

Paperwork Reduction Act

Approval Expires 4/30/22

&EPA

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System Part II: Compliance Evaluation

(This information is solicited under the authority of the Safe Drinking Water Act)

I. Name and Address of Reporting Agency

U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard Chicago, IL 60604

Michigan DI Program

II. Date Prepared (month, day, year) IV. Reporting Period (month, year) III. State Contact (name, telephone no.) July 09, 2019

September 30, 2013 October 1, 2012

					Class and Type of Injection Wells							
							ll ,					
			Item		i	SWD 2D	ER 2R	HC 2H	III	IV	V	
	Total Wells	Α	Number of Wells v	vith Violations	0	11	4	0	0	0	0	
			Number of Unation Violation		0	1	0	0	0	0	0	
V.			2. Number of Mec	nanical Integrity Violations	0	9	3	0	0	0	0	
Summary of	Total	В	Number of Operat Maintenance Vi		0	0	0	0	0	0	0	
Violations	Violations	Ь	4. Number of Plug and Abandonm		0	1	0	0	0	0	0	
			5. Number of Mon Reporting Viola		О	0	0	0	0	0	0	
			6. Number of Othe (Specify)	r Violations	0	0	1	0	0	0	0	
	Total Wells	Α	Number of Wells v Enforcement Acti		0	8	8	0	0	0	0	
			1. Number of Noti	ces of Violation	0	1	0	0	0	0	0	
			2. Number of Con	sent Agreements	0	0	4	0	0	0	0	
VI. Summary			3. Number of Adm	inistrative Orders	0	0	0	0	0	0	0	
of	Total Enforcement	В	4. Number of Civi		0	0	0	0	0	0	0	
Enforcement	Actions		5, Number of Crin		0	0	0	0	0	0	0	
			6, Number of Well		0	0	0	0	0	0	0	
			7. Number of Pipe		0	0	0	0	0	0	0	
			8. Number of Othe (Specify)	er Enforcement Actions	0	7	5	0	0	0	0	
VII. Summary	Number of Well			A. This Quarter								
of Compliance	Returned to Co	mpli	ance	B. This Year	0	6	9	0	0	0	0	
VIII. Contamination	Number of Cases of Alleged Contamination of a USDW		ation of a USDW	0	0	0	0	0	0	0		
IX. MIT Resolved	Percent of MIT Violations Resolved in 90 Days				0	50	40	0	0	0	0	

X. Remarks/Ad Hoc Report (Attach additional sheets)

I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature and Typed or Printed Name and Title of Person Completing Form Telephone No.

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Section V. Summary of Violations

(Includes all noncompliance; significant and non-significant)

A. Total Wells: For each well class, enter the number of wells with one or more violations in this federal fiscal year to date. Enter each well only once. Include all wells with violations, even those with violations that have been returned to compliance.

B. Total Violations:

Items 1-6: For each well class, enter the number of times each violation type has been identified this federal fiscal year to date.

Section VI. Summary of Enforcement

A. Total Wells: For each well class, enter the number of wells with one or more violations that have been addressed by the specific type of enforcement action in this federal fiscal year to date. Enter each well only once.

B. Total Enforcement Actions:

Items 1-8: For each well class, enter the number of times wells with one or more violations have been addressed by the specific type of enforcement action indicated in the row, in this federal fiscal year to date. (Count each draft and final Administrative Order.)

Section VII. Number of Wells Returned to Compliance

A "Well Returned to Compliance" is a well that has all underlying violations resolved and compliance has been verified by the primacy program. Note: An enforcement action alone (e.g., well shut-in) does not constitute a "return to compliance;" however, plugging and abandonment does constitute a return to compliance.

- A. For each well class, enter the number of wells returned to compliance through the second quarter for midyear reporting and through the fourth quarter for end of the year reporting.
- B. For each well class, enter the number of wells returned to compliance through the second quarter for midyear reporting and through the fourth quarter for end of the end of year reporting.

Section VIII. USDW Contaminations

For each well class, enter the number of times a well in noncompliance has allegedly contaminated an underground source of drinking water (USDW) this federal fiscal year to date.

Section IX. Percent of MIT Violations Resolved in 90 Days

For each well class, enter the percentage of MIT violations resolved within 90 days as of the end of the reporting period.

- Mechanical Integrity violations are as defined in Section V, under "Mechanical Integrity."
- Resolved is defined as returned to compliance (per Section VII).
- MI violations not associated with loss of mechanical integrity (such as reporting) are not counted under this section.
- Violations occurring WITHIN 90 days of September 30 should be included in reporting for the following federal fiscal year.

To calculate the percentage:

- Add up the total number of MIT violations that occurred within a one year period prior to 90 days before the end of the fiscal year reporting cycle i.e., 6/30.
- Add up the number of these violations that were resolved within 90 days as of 3/31(for midyear reporting) or as of 9/30 (for end of year reporting).
- Calculate the percentage of total MIT violations that were resolved in 90 days or less.

Example for Midyear reporting:

- Number of violations that occurred from 7/1 3/31 = 8
- Number of these violations resolved within 90 days as of 3/31 = 2
- Percentage of MIT violation resolved within 90 days = 25%

Example for End of Year reporting:

- Number of MIT violations that occurred from 7/1 6/30 = 10• 8 from midyear plus 2 additional (4/1 to 6/30)
- Number of these violations resolved within 90 days as of 9/30 = 5
 2 (from midyear) + 3 (from 4/1 to 6/30)
- Percentage of MIT resolved within 90 days by 9/30 = 50%

Paperwork Reduction Act

Approval Expires 4/30/22

SEPA

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System Part II: Compliance Evaluation

(This information is solicited under the authority of the Safe Drinking Water Act)

I. Name and Address of Reporting Agency

U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard Chicago, IL 60604

Michigan DI Program

II. Date Prepared (month, day, year)
July 10, 2019

III. State Contact (name, telephone no.)

IV. Reporting Period (month, year)

October 1, 2013

September 30, 2014

					Class and Type of Injection Wells						
							li .				
			Item		ı	SWD 2D	ER 2R	HC 2H	10	IV	V
	Total Wells	Α	Number of Wells v	vith Violations	2	11	7	0	2	0	0
			Number of Unation Injection Violati		0	0	0	0	0	0	0
V.			2. Number of Mec	nanical Integrity Violations	2	7	4	0	1	0	0
Summary of	Total	В	Number of Operat Maintenance Vi		0	1	0	0	0	0	0
Violations	Violations	В	4. Number of Plug and Abandonm		0	0	0	0	1	0	0
			5. Number of Mon Reporting Viola		0	0	0	0	0	0	0
			6. Number of Othe (Specify)	er Violations	0	3	3	0	0	0	0
	Total Wells	Α	Number of Wells v Enforcement Action		0	10	2	0	1	0	0
			1. Number of Noti	ces of Violation	0	0	0	0	0	0	0
			2. Number of Con	sent Agreements	0	0	0	0	0	0	0
VI.			3. Number of Adm	inistrative Orders	0	0	0	0	0	0	0
Summary	Total Enforcement	В	4. Number of Civi	Referrals	0	0	0	0	0	0	0
Enforcement	Actions		5. Number of Crin	ninal Referrals	0	0	0	0	0	0	0,
	-		6. Number of Well	Shut-ins	0	0	0	0	0	0	0
İ			7. Number of Pipe	line Severances	0	0	0	0	0	0	0
			8. Number of Othe (Specify)	er Enforcement Actions	0	11	2	0	1	0	0
VII. Summary	Number of Wel	ls		A. This Quarter							
of Compliance	Returned to Co	mpli	ance	B. This Year	0	13	3	0	0	0	0
VIII. Contamination	Number of Cases of Alleged Contamination of a USDW		0	0	0	0	0	0	0		
IX. MIT Resolved	Percent of MIT Violations Resolved in 90 Days			0	53	44	0	0	Ö	0	

X. Remarks/Ad Hoc Report (Attach additional sheets)

Certification

I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature and Typed or Printed Name and Title of Person Completing Form

Date

Telephone No.

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Section V. Summary of Violations

(Includes all noncompliance; significant and non-significant)

A. Total Wells: For each well class, enter the number of wells with one or more violations in this federal fiscal year to date. Enter each well only once. Include all wells with violations, even those with violations that have been returned to compliance.

B. Total Violations:

Items 1-6: For each well class, enter the number of times each violation type has been identified this federal fiscal year to date.

Section VI. Summary of Enforcement

A. Total Wells: For each well class, enter the number of wells with one or more violations that have been addressed by the specific type of enforcement action in this federal fiscal year to date. Enter each well only once.

B. Total Enforcement Actions:

Items 1-8: For each well class, enter the number of times wells with one or more violations have been addressed by the specific type of enforcement action indicated in the row, in this federal fiscal year to date. (Count each draft and final Administrative Order.)

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A "Well Returned to Compliance" is a well that has all underlying violations resolved and compliance has been verified by the primacy program. Note: An enforcement action alone (e.g., well shut-in) does not constitute a "return to compliance," however, plugging and abandonment does constitute a return to compliance.

- A. For each well class, enter the number of wells returned to compliance through the second quarter for midyear reporting and through the fourth quarter for end of the year reporting.
- B. For each well class, enter the number of wells returned to compliance through the second quarter for midyear reporting and through the fourth quarter for end of the end of year reporting.

Section VIII. USDW Contaminations

For each well class, enter the number of times a well in noncompliance has allegedly contaminated an underground source of drinking water (USDW) this federal fiscal year to date.

Section IX. Percent of MIT Violations Resolved in 90 Days

For each well class, enter the percentage of MIT violations resolved within 90 days as of the end of the reporting period.

- Mechanical Integrity violations are as defined in Section V, under "Mechanical Integrity."
- Resolved is defined as returned to compliance (per Section VII).
- MI violations not associated with loss of mechanical integrity (such as reporting) are not counted under this section.
- Violations occurring WITHIN 90 days of September 30 should be included in reporting for the following federal fiscal year.

To calculate the percentage:

- Add up the total number of MIT violations that occurred within a one year period prior to 90 days before the end of the fiscal year reporting cycle i.e., 6/30.
- Add up the number of these violations that were resolved within 90 days as of 3/31 (for midyear reporting) or as of 9/30 (for end of year reporting).
- Calculate the percentage of total MIT violations that were resolved in 90 days or less.

Example for Midyear reporting:

- Number of violations that occurred from 7/1 3/31 = 8
- Number of these violations resolved within 90 days as of 3/31 = 2
- Percentage of MIT violation resolved within 90 days = 25%

Example for End of Year reporting:

- Number of MIT violations that occurred from 7/1 6/30 = 10• 8 from midyear plus 2 additional (4/1 to 6/30)
- Number of these violations resolved within 90 days as of 9/30 = 5
 2 (from midvear) + 3 (from 4/1 to 6/30)
- Percentage of MIT resolved within 90 days by 9/30 = 50%

Paperwork Reduction Act

Approval Expires 4/30/22

&EPA

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System Part II: Compliance Evaluation

(This information is solicited under the

I. Name and Address of Reporting Agency

U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard Chicago, IL 60604

Date

Telephone No.

Michigan DI Program

authority of the Safe Drinking Water Act) II. Date Prepared (month, day, year) III. State Contact (name, telephone no.) IV. Reporting Period (month, year) March 08, 2019 October 1, 2014 September 30, 2015 Class and Type of Injection Wells II SWD ER HC 2H Ш ŧ٧ v 2D 2R Item Total Number of Wells with Violations 0 5 1 0 0 Wells 1. Number of Unauthorized 0 0 0 0 0 Injection Violations ٧. 2. Number of Mechanical Integrity Violations 0 3 0 n 0 Summary Number of Operation and 0 0 0 0 0 Maintenance Violations Total of В Violations 4. Number of Plugging and Abandonment Violations 0 0 0 0 0 Violations 5. Number of Monitoring and ٥ 0 0 0 0 Reporting Violations 6, Number of Other Violations 2 0 0 0 (Specify) Number of Wells with 6 2 1 Total Wells 2 0 1. Number of Notices of Violation 0 0 0 0 0 2. Number of Consent Agreements 0 ٥ Ω n ٥ VI. 3. Number of Administrative Orders 0 0 0 0 0 Summary 4. Number of Civil Referrals 0 0 0 0 0 Total Enforcement В 5. Number of Criminal Referrals Actions 0 0 0 0 0 Enforcement 6. Number of Well Shut-ins 0 0 0 0 n 7. Number of Pipeline Severances 0 0 0 0 0 8. Number of Other Enforcement Actions 2 8 2 1 0 (Specify) A. This Quarter VII Number of Wells Summary Returned to Compliance B. This Year 2 5 4 0 0 Compliance Number of Cases of Alleged Contamination of a USDW 0 0 0 0 0 Contamination 0 45 44 n 0 Percent of MIT Violations Resolved in 90 Days MIT Resolved X. Remarks/Ad Hoc Report (Attach additional sheets) Certification I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

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Section V. Summary of Violations

(Includes all noncompliance; significant and non-significant)

A. Total Wells: For each well class, enter the number of wells with one or more violations in this federal fiscal year to date. Enter each well only once. Include all wells with violations, even those with violations that have been returned to compliance.

B. Total Violations:

Items 1-6: For each well class, enter the number of times each violation type has been identified this federal fiscal year to date.

Section VI. Summary of Enforcement

A. Total Wells: For each well class, enter the number of wells with one or more violations that have been addressed by the specific type of enforcement action in this federal fiscal year to date. Enter each well only once.

B. Total Enforcement Actions:

Items 1-8: For each well class, enter the number of times wells with one or more violations have been addressed by the specific type of enforcement action indicated in the row, in this federal fiscal year to date. (Count each draft and final Administrative Order.)

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A "Well Returned to Compliance" is a well that has all underlying violations resolved and compliance has been verified by the primacy program. Note: An enforcement action alone (e.g., well shut-in) does not constitute a "return to compliance;" however, plugging and abandonment does constitute a return to compliance.

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Section VIII. USDW Contaminations

For each well class, enter the number of times a well in noncompliance has allegedly contaminated an underground source of drinking water (USDW) this federal fiscal year to date.

Section IX. Percent of MIT Violations Resolved in 90 Days

For each well class, enter the percentage of MIT violations resolved within 90 days as of the end of the reporting period.

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- Number of MIT violations that occurred from 7/1 6/30 = 10• 8 from midyear plus 2 additional (4/1 to 6/30)
- Number of these violations resolved within 90 days as of 9/30 = 5
 2 (from midyear) + 3 (from 4/1 to 6/30)
- Percentage of MIT resolved within 90 days by 9/30 = 50%

Paperwork Reduction Act



United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System Part II: Compliance Evaluation (This information is solicited under the

I. Name and Address of Reporting Agency

U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard

Chicago, IL 60604

	authority of the Safe Drinking Water Act)				Michigan DI Program								
H. Date Prepared	(month, day, ye	ar)	III. State Co	ntact (name, telephone no.)	IV. Reporting Period (month, year)								
March 08	3, 2019				October 1, 2015 September 30, 201								
					Class and Type of Injection Wells								
							II.						
						SWD ER							
	-	Ι	ltem		1 1	2D	2R	2H	III	IV	V		
	Total Wells	Α	Number of Wells v		0	6	1	0	0	0	0		
			Number of Unau Injection Violati		0	0	0	0	0	0	0		
V.			2. Number of Mec	hanical Integrity Violations	0	4	0	0	0	0	0		
Summary	Total	В	Number of Operat Maintenance Vi		0	0	0	0	0	0	0		
Violations	Violations		4. Number of Plug and Abandonm		0	0	0	0	0	0	0		
	•		5. Number of Mon Reporting Viola	0	0	0	0	0	0	0			
			6. Number of Othe (Specify)	er Violations	0	2	1	0	0	0	0		
	Total Wells	А	Number of Wells v Enforcement Action		1	4	1	0	0	0	0		
			1. Number of Noti	ces of Violation	0	0	0	0	0	0	0		
			2. Number of Con	sent Agreements	0	0	0	0	0	0	0		
VI.			3. Number of Adm	ninistrative Orders	0	0	0	0	0	0	0		
Summary of	Total		4. Number of Civil	Referrals	0	0	0	0	0	0	0		
Enforcement	Enforcement Actions	В	5, Number of Crin	ninal Referrals	0	0	0	0	0	0	0		
			6. Number of Well	Shut-ins	0	0	0	0	0	0	0		
			7. Number of Pipe	line Severances	0	0	0	0	0	0	0		
	·		8. Number of Othe (Specify)	er Enforcement Actions	1	5	1	0	0	0	0		
VII. Summary	Number of Well	ls		A. This Quarter									
of Compliance	Returned to Co		ance	B. This Year	0	3	1	0	0	0	0		
VIII. Contamination	Number of Cases of Alleged Contamination of a USDW				0	0	0	0	0	0	0		
IX. MIT Resolved	Percent of MIT	ations Resolved in S	30 Days	0	42	44	0	0	0	0			
X. Remarks/Ad	Hoc Report (Atta	ich a	dditional sheets)							-b			
				Certificat	tion								
I certify	that the stateme	nts I	have made on this	form and all attachments theref	to are true, acc	curate, and o	complete, I	acknowl	edge that any k	nowingly f	alse		

or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature and Typed or Printed Name and Title of Person Completing Form	1

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(Includes all noncompliance; significant and non-significant)

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Items 1-6: For each well class, enter the number of times each violation type has been identified this federal fiscal year to date.

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Section VIII. USDW Contaminations

For each well class, enter the number of times a well in noncompliance has allegedly contaminated an underground source of drinking water (USDW) this federal fiscal year to date.

Section IX. Percent of MIT Violations Resolved in 90 Days

For each well class, enter the percentage of MIT violations resolved within 90 days as of the end of the reporting period.

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Paperwork Reduction Act

Approval Expires 4/30/22

U.S. Environmental Protection Agency Region 5

SEPA

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System
Part II: Compliance Evaluation
(This information is solicited under the
authority of the Safe Drinking Water Act)

77 West Jackson Boulevard Chicago, IL 60604

I. Name and Address of Reporting Agency

Michigan DI Program

II. Date Prepared (month, day, year)
March 08, 2019

III. State Contact (name, telephone no.)

IV. Reporting Period (month, year)

From

October 1, 2016

September 30, 2017

						Class and Type of Injection Wells					
							<u> </u>				
			Item		ı	SWD 2D	ER 2R	HC 2H	Ш	IV	V
	Total Wells	А	Number of Wells v	vith Violations	0	0	0		0	0	0
			1. Number of Unau Injection Violati		0	0	0		0	0	0
V.			2. Number of Mec	nanical Integrity Violations	. 0	0	0		0	0	0
Summary	Total	В	Number of Operat Maintenance Vi		0	0	0		0	0	0
Violations	Violations	В	4. Number of Plug and Abandonm		0	0	0		0	0	0
			5, Number of Mon Reporting Viola		0	0	0		0	0	0
			6, Number of Othe (Specify)		0	0	0		0	0	0
	Total Wells	Α	Number of Wells v Enforcement Action		1	2	1		0	0	0
,			1. Number of Noti	ces of Violation	0	0	0		0	0	0
			2. Number of Con	sent Agreements	0	0	0		0	0	0
VI. Summary			3. Number of Adm	inistrative Orders	0	0	0		0	0	0
of	Total Enforcement	В	4. Number of Civil	Referrals	0	0	0		0	0	0
Enforcement	Actions		5, Number of Crin	inal Referrals	0	0	0		0	0	0
			6. Number of Well	Shut-ins	0	0	0	.,,	0	0	0
			7. Number of Pipe		0	0	0		0	0	0
			8. Number of Othe (Specify)	r Enforcement Actions	1	2	1		0	0	0
VII. Summary	Number of Well			A, This Quarter							
of Compliance	Returned to Co	mpli	ance	B. This Year	0	0	1		0	0	0
VIII. Contamination	Number of Cases of Alleged Contamination of a USDW		0	0	0		0	0	0		
IX. VIT Resolved	Percent of MIT Violations Resolved in 90 Days			0	42	44		0	0	0	

X. Remarks/Ad Hoc Report (Attach additional sheets)

Certification

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Signature and Typed or Printed Name and Title of Person Completing Form

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Items 1-6: For each well class, enter the number of times each violation type has been identified this federal fiscal year to date.

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Paperwork Reduction Act

Approval Expires 4/30/22

&EPA

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System
Part II: Compliance Evaluation
(This information is solicited under the
authority of the Safe Drinking Water Act)

I. Name and Address of Reporting Agency
U.S. Environmental Protection Agency Region 5
77 West Jackson Boulevard

Chicago, IL 60604

Michigan DI Program

II. Date Prepared (month, day, year)
April 10, 2019

III. State Contact (name, telephone no.)
Jill Dean
2025648241

IV. Reporting Period (month, year)

rom

October 1, 2017

September 30, 2018

			l l		1	,		1	•	,		
							Class and	Type of Inje	njection Wells			
							11					
			Item		1	SWD 2D	ER 2R	HC 2H	111	IV	V	
	Total Wells	А	Number of Wells v	vith Violations	1	99	10	0	1	0	1	
			1, Number of Unat Injection Violati		0	13	0	0	0	0	0	
V.			2. Number of Mec	nanical Integrity Violations	0	68	10	0	1	0	0	
Summary of	Total	В	Number of Operat Maintenance Vi		1	0	0	0	0	0	0	
Violations	Violations		4. Number of Plug and Abandonm		0	0	0	0	0	0	1	
	i		5. Number of Mon Reporting Viola		0	38	0	0	0	0	0	
			6. Number of Othe (Specify)		0	33	0	0	0	0	0	
	Total Wells	А	Number of Wells v Enforcement Acti		1	99	10	0	1	0	1	
			1. Number of Noti	ces of Violation	1	5	0	0	0	0	1	
			2. Number of Con	sent Agreements	0	0	0	0	0	0	0	
VI. Summary			3. Number of Adm	inistrative Orders	0	8	0	0	0	0	0	
of	Total Enforcement	В	4. Number of Civi	Referrals	0	0	0	0	0	0	0	
Enforcement	Actions		5. Number of Crin	ninal Referrals	0	0	0	0	0	0	0	
			6. Number of Wel		0	61	10	0	1	0	0	
			7. Number of Pipe		0	0	0	0	0	0	0	
			8. Number of Othe (Specify)	er Enforcement Actions	0	1	0	0	0	0	0	
VII. Summary	Number of Well			A. This Quarter								
of Compliance	Returned to Co	mpli	ance	B. This Year	0	1	10	0	1	0	0	
VIII. Contamination	Number of Cases of Alleged Contamination of a USDW		0	0	0	0	0	0	0			
IX. MIT Resolved	Percent of MIT Violations Resolved in 90 Days			0	0	0	. 0	0	0	0		

X. Remarks/Ad Hoc Report (Attach additional sheets)

Certification

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Signature and Typed or Printed Name and Title of Person Completing Form Jill Dean, Physical Scientist

Date 08/06/2019

Notes

Number of Other Violations (Specify)	
13 falsify; 20 signature	
Number of Other Enforcement Actions (Specify)	
NOI	

&EPA

United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460

UIC Federal Reporting System Part II: Compliance Evaluation

(This information is solicited under the authority of the Safe Drinking Water Act)

I. Name and Address of Reporting Agency

U.S. Environmental Protection Agency Region 5 77 West Jackson Boulevard Chicago, IL 60604

Michigan DI Program

II. Date Prepared (month, day, year) September 24, 2019 III. State Contact (name, telephone no.) Valoria Robinson 3128864281 IV. Reporting Period (month, year)

From

October 1, 2018

March 31, 2019

						Class and Type of Injection Wells					
						11					
			ltem		1	SWD 2D	ER 2R	HC 2H	111	IV	V
V. Summary of Violations	Total Wells	А	Number of Wells v	vith Violations	2	16	11	0	0	0	1
	Total Violations	В	1. Number of Unat		0	0	0	0	0	0	0
			2. Number of Mec	nanical Integrity Violations	2	16	11	0	0	0	1
			Number of Operat Maintenance Vi		0	0	0	0	0	0	0
			4. Number of Plug and Abandonm		0	0	0	0	0	0	0
			5. Number of Monitoring and Reporting Violations		0	0	0	0	0	0	0
			6. Number of Other Violations (Specify)		0	0	0	0	0	0	0
VI. Summary of Enforcement	Total Wells	Α	Number of Wells v Enforcement Action		2	23	11	0	0	0	0
	Total Enforcement Actions	В	1. Number of Noti	ces of Violation	0	7	0	0	0	0	0
			2. Number of Con	sent Agreements	0	0	0	0	0	0	0
			3. Number of Adm	inistrative Orders	0	0	0	0	0	0	0
			4. Number of Civil	Referrals	0	0	0	0	0	0	0
			5. Number of Crin	ninal Referrals	0	0	0	0	0	0	0
			6. Number of Well	Shut-ins	0	0	0	0	0	0	0
			7. Number of Pipe	line Severances	0	0	0	0	0	0	0
			8. Number of Othe (Specify)	er Enforcement Actions	2	16	11	0	0	0	0
VII. Summary of Compliance	Number of Wells			A. This Quarter	2	14	10	0	0	0	50
	Returned to Compliance		ance	B. This Year							
VIII. Contamination	Number of Cases of Alleged Contamination of a			ation of a USDW	0	0	0	0	0	0	0
IX. MIT Resolved Percent of MIT Violations Resolved in 90 Days					0	0	0	0	0	0	0

X. Remarks/Ad Hoc Report (Attach additional sheets)

Certification

I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature and Typed or Printed Name and Title of Person Completing Form Valoria Robinson

Date 09/24/2019

Notes

f Other Enforcement Actions (Specify	fy)
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Cease Injection Letters